

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MG</i>		<i>3/1/00</i>
O.I.P.E. CLASSIFIER	<i>SCW</i>	<i>11</i>	<i>3/1/00</i>
FORMALITY REVIEW	<i>OK</i>	<i>71423</i>	<i>5-15-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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